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Bib Data Sheet

CONFIRMATION NO. 2447

SERIAL NUMB 09/909,729	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		CLASS 604		GROUP ART UNIT 3763		ATTORNEY DOCKET NO. AMS-008		
Michael Hog Ryan P. Bo ** CONTINUING D THIS APPL	ucher, San I DATA ******* ICATION IS A CIP OF 09 LICATIONS 05469 03/12	Alto, CA; Francisco, CA; A CIP OF 09/4/ //333,074 06/14/	18,727 1 /1999 P <i>i</i>	AT 6,206,868			3032		
met Verified and Acknowledged Examiner's Signature Initials COUNTRY D					DRA	HEETS TOTAL RAWING CLAIM 15 28		VIS.	INDEPENDENT CLAIMS 2
ADDRESS 1473									
TITLE Catheter for remov	ing emboli f	rom saphenous	vein gra	afts and native	corona	ary arter	ies		
RECEIVED N	FILING FEE FEES: Authority has been given in Paper RECEIVED No to charge/credit DEPOSIT ACCOUNT					□ All Fees □ 1.16 Fees (Filing) □ 1.17 Fees (Processing Ext. of time) □ 1.18 Fees (Issue) □ Other □ Credit			